FILED
Jul 16, 2002 8:00 am
Secretary of State
07-16-2002 90347 014 ***158.75

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000011204

1. Entity Name
PARADISE OF HIALEAH INC.

Principal Place of Business	Mailing Address
592 EAST 45TH ST. HIALEAH FL 33013 US	592 EAST 45TH ST. HIALEAH FL 33013

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
592 EAST 45th St.	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
—	Same
City & State: HIALEAH, FL 33013	City & State: Same
Zip: 33013 Country: USA	Zip: Same Country: Same

4. FEI Number 65-0644376 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
POUTOU, XIOMARA C 592 EAST 45TH ST. HIALEAH FL 33013	Name: -N/A- Street Address (P.O. Box Number is Not Acceptable): -N/A- -N/A- City: -N/A- FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Xiomara Poutou 05/11/2002
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD POUTOU, XIOMARA C 592 EAST 45TH ST. HIALEAH FL 33013	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARRAZANA, MAYLIN 592 EAST 45TH ST. HIALEAH FL 33013	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S POUTOU, MIGUEL 592 E 45 ST HIALEAH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Xiomara Poutou 05/11/2002 (305) 681-9326
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #